



Waivers & Funding Sources: FAQ

How is it determined how much funding is available through a waiver and why are there limits?

Each waiver has a different determination for how much funding is available, based on a person's assessed need. The Individual Options Waiver has an assessment, called the Ohio Developmental Disabilities Profile (ODDP), that a certified SSA must complete to determine what an individual's funding range is. The Level One Waiver and the SELF Waiver both have set caps on funding, so for those waivers, the amount of funding available must be at minimum able to meet the health and safety needs for the person to be on one of those waivers.

How is it determined what waiver we can receive?

The type of waiver that is offered to a person is based on the person's assessed needs. Once a person's needs have been determined, the County Board uses that information, along with what natural supports and community based alternative services are available, to determine which waiver would work best to meet that person's unique needs.

There are not an unlimited number of waivers available to a County Board. There are many factors that go into whether a County Board has waivers available to offer individuals served.

How would you recommend a family/caregiver demonstrate the need for a waiver funded item/service?

Good Communication with your County Board Service and Support Specialist (SSA) is most important. Be sure your SSA knows and understands the needs you have and challenges you are facing as well as the other resources you have tried to utilize to meet the need. Your SSA will then help you know what documentation is needed.

What are the resources available to families who want to learn more about waivers and the services available through the waivers?

You can visit the Ohio Department of Developmental Disabilities website, the Lucas County Board of Developmental Disabilities website, join the parent Facebook group through the Lucas County Board of DD's Facebook page, or call your SSA.



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Is there a step to help resolve issues before going to a State Hearing?

Yes, you are able to contact the County Board and request a County Conference. The County Conference is an opportunity for you and the County Board to get together and try to come to an agreement on the issue at hand without having to go to a State Hearing. The person who mediates the County Conference is a person from the County Board who has not already been a part of the team or the discussion that has taken place.

Can I get a waiver if all I want are home or vehicle modifications?

If you have a need for a home or vehicle modification, you should reach out to your SSA and work with them on how to meet your need. There is a requirement to be enrolled on a waiver that you must have a need for a waiver service every 30 days. If not, then SSAs have to document why there wasn't a need and that the waiver is still necessary to meet an individual's health and safety needs. Thus, if there is not an on-going need, a waiver may not be the best option.

Once I have a waiver, will it pay for everything?

Each waiver has funding limitations and services covered are based on the specific waiver and an individual's assessed needs. It is important to contact your SSA for specific discussion about your needs. The waiver pays for services as defined in the various HCBS waiver rules respective to each waiver type, and in some case equipment. The waiver does not pay for things such as medical bills, rent, food, consumable items (incontinent supplies, formula's, etc.), equipment/supplies otherwise available under the Medicaid Card, or utilities (note, this is just a few examples and not meant to be an exhaustive list of what is not covered by a waiver).

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